MAY. 30. 2006	11 -	- ART H	- FEE(S)	TRANSMITTAL	NO. 764	۲. ۱
· (N	this form, together wi	th applicable	fee(s), to: 1	Mail Stop ISSUE Commissioner for P.O. Box 1450 Alexandria, Virgi Fax (571)-273-2885	Patents nia 22313-1450	
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				Departe May	30,300lo	(Depositor's name) (Signature) (Date)
APPLICATION NO.	FILING DATE		FIRST NAME	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/765,434	01/27/2004		Stuart R.		HE0216	1513
TITLE OF INVENTION: PRECONNECTORIZED FIBER OPTIC DROP CABLES AND ASSEMBLIES FOR EFFICIENT DEPLOYMENT						
APPLN. TYPE	SMALL ENTITY	issue pee		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	06/05/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS	:	
WONG, ERIC K 288				385-062000 95/31/6	<u> 1996 TBESHAH2 0000005</u>	5 192167 10765434
Tee Address indicat	e address or indication of "Fe lence address (or Change of (2) attached. ion (or "Fee Address" Indica or more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (i) the names of up to 3 registered patent stormeys or agents OR, alternatively, 02 FC: 1504 (2) the name of a single firm (having as member a registered automey or agent) and the names of up to 2 registered patent automeys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Corning Cable Systems LLC Hickory, North Carolina, USA						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 😾 Corporation or other private group entity 🔘 Government						
4a. The following fee(s) are Exissue Fee Y Publication Fee (No so Advance Order - # of	mall entity discount permitte		b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is antached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-2167 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered automey or agent; or the assignee or other party in						
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Authorized Signature	72if/ 2.6.1	1. J.		Date	20, 20	06
	Michael E. C			Registration N	· ·	
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